

FORMS AND INSTRUCTIONS

REQUIRED PROGRAMS IN SECONDARY SCHOOLS (RPSS)

N.J.A.C. 6A:24-6.1 requires that annually the School Management Team (SMT) of all Abbott secondary schools, in consultation with the Chief School Administrator (CSA), the principal and the SRI Team, shall submit a revised plan for the implementation of Required Programs in Secondary Schools (RPSS) to the Department of Education (DOE) for approval, with copies to the CSA and the board.

In December 1999, a revised second year (2000-2001) of an approved two-year RPSS Plan was submitted to the DOE. For 2001-2002, secondary schools must submit a one-year plan by revising the current year (2000-2001) RPSS Plan. The programmatic section of the RPSS Plan should be completed if the following apply:

- any section of the RPSS plan was not approved (e.g., inventory of existing programs was not provided or was inadequate, no evidence showing that programs have worked successfully in other schools with similar characteristics);
- a revision is made to any of the six RPSS areas or the attachments;
 - a program or service not included in the prior year's plan is proposed for any of the six RPSS areas;
- a two-year RPSS plan was not submitted in the previous year; and
- the school is not a WSR first, second, or mid-year cohort school.

Since the new submission will be a revision of the second year (2000-2001) of the RPSS plan, it is necessary to review the plan and the comments regarding the current year's plan received from the DOE after its review.

- **Note:** It will be necessary for all secondary schools to complete a revised activity plan and budget statement for 2001-2002.

A. SUBMISSION

Annually, on or before **December 1**, each non-WSR secondary school must submit the Required Programs in Secondary Schools Plan (with all attachments) by sending the appropriate copies as shown to the offices listed below:

OFFICE	# OF COPIES
Orlando Castro, Director NJ Department of Education Office of Program Review and Improvement P. O. Box 500 Trenton, New Jersey 08625-0500	6 copies
Joan Tomlin, Program Manager PIRC-Central 1090 King Georges Post Rd. Bldg. 9 Edison, NJ 08837	Original and 2 copies
Donna Snyder, Program Manager PIRC-South 1492 Tanyard Road Sewell, NJ 08080	Original and 2 copies
Eunice Y. Couselo Acting Program Manager PIRC-North 240 So. Harrison Street East Orange, NJ 07018	Original and 2 copies

B. REQUIRED PROGRAMS IN SECONDARY SCHOOLS REVISED PLAN REVIEW

The Department of Education (DOE) will review all submissions to ensure that:

- required sections are complete and accurate;
- existing programs have been inventoried and assessed for effectiveness and efficiency;
- required programs described are supported by an inventory and assessment of student needs;
- expenditures support the programs described;
- the submission is complete, including signatures and assurances; and
- SMTs and Local Education Agencies (LEAs) are notified of final approvals.

Incomplete submissions are subject to revision, return, and/or disapproval. Once a Required Programs in Secondary Schools Plan is approved, the board shall accord these programs and services the highest priority in the development of the 2001-2002 school budget, making such reallocations and dedicating such resources as are necessary to ensure their full implementation.

C. COMPLETING THE RPSS PLAN

Below are the instructions for completing the RPSS Plan. The forms are preceded by information pertaining to the form and directions for completion. A complete copy of the instructions and forms is located on the NJDOE Web site (<http://www.state.nj.us/education>).

- **NOTE:** The RPSS Plan forms package has an imbedded header and footer for your convenience. Please insert the name of your school and district in the header. The footer will automatically paginate and date your submission.

The Required Programs in Secondary Schools Plan should include:

1. SUBMISSION CHECKLIST FOR RPSS PLAN

As a final step in the completion of the RPSS Plan, the Submission Checklist should be used to ensure that the submission package is complete.

2. COVER PAGE

Complete all the information and the required certifications.

3. ONE-YEAR RPSS PLAN REVIEW OF PROGRESS

Complete a review of progress for the one-year RPSS Plan in each of the six areas including WSR exploration and selection status. The review should include progress in achieving objectives, activities completed, and an evaluation summary. The WSR exploration review should list the models explored, developer visits, staff visits to other schools, and progress toward selection of a model. Any revisions required and problems encountered should be included. Answer each question on the form by repeating the question and providing a summary response.

4. INVENTORY AND ASSESSMENT

For each of the six required RPSS areas, indicate what currently exists in the school or is being provided by the school in collaboration with a community agency. Determine how well these programs and services are serving the student population based on an assessment of their efficacy and efficiency.

5. REVIEW OF COMMUNITY RESOURCES

For each of the six required RPSS areas, complete a review of community resources that could be used to address the area(s) of need.

6. SMT RECOMMENDATIONS

After the inventory and assessment are complete, each item identified must be evaluated as to its effectiveness and efficiency. The review of community resources should also be used to determine possible options for the delivery of programs and services to meet the needs of the school's community. Provide recommendations for elimination or modification of programs or services that are not effective and efficient, or that overlap with the proposed new program or service, or community resource.

Note:

- An effective program or service is one that produces the expected and desired result.
- An efficient program or service is one that produces the intended result in a cost-effective way.

7. ACTIVITY PLAN

Utilizing the results of the inventory, evaluation of effectiveness and efficiency, and review of community resources, develop a comprehensive activity plan. This plan should identify all programs and services including collaborations, etc., and include existing programs to be continued, along with any new programs planned for implementation in each of the six RPSS areas. For each of the six areas, provide an Activity Plan form for the programs and services needed to implement the RPSS. Complete the following for each page of the Activity Plan:

- a) Identifying Information: Insert the name of the district and school and check the appropriate RPSS area.
- b) Goal and Objective: Create a goal(s) and objective(s) relating to accomplishment of the RPSS area. Where appropriate, the objective should target any area that is currently not meeting the state standard (e.g., dropout rate, attendance).
- c) Activity: Describe the tasks and activities in chronological order planned for the accomplishment of each goal and objective in the Activity column; include the positions required for secondary schools in the regulations *N.J.A.C. 6A:24-6.1(a)* with their related tasks.
- d) New or Existing Program: Place an "N" in this column if the program or service is NEW. Place an "E" in this column if the program or service is EXISTING in the school.
- e) Timeline: Indicate the month and year the activity will be completed in the Timeline column. Avoid using "ongoing" for your activities. If ongoing is used frequently, it probably means that additional benchmark steps should be added to the activity.
- f) Budget Description: In providing a budget description, use titles such as salary of teacher or dropout prevention officer, nurse's supplies, travel mileage, one conference registration, and/or 100 career textbooks. The description must be detailed and itemized so that it corresponds to the total sum of the GAAP Code on the Budget Statement.
- g) 2000-2001 Amount: This column must be completed for all programs noted as existing in the previous column. List, in detail, all of the 2000-2001 expenditures necessary to complete the activity in the Budget Description column.
- h) 2001-2002 Amount: List, in detail, all expenditures necessary to complete the activity in the Budget Description column.

- i) GAAP Code and Funding Source: Indicate the GAAP code from the Form J, Budget Statement, that coincides with the expenditures and costs for each activity, along with the revenue source (e.g., Demonstrably Effective Program Aid (DEPA), Title I, Distance Learning Aid).
- j) Method of Accountability: Indicate in the Method of Accountability column the anticipated result/outcome and specific data that will track the impact of each program or service.

8. EVALUATION

Describe the methods that will be used to evaluate (1) the progress (formative) and outcomes (summative) of the goals and objectives in the 2001-2002 WSR RPSS Plan; and (2) student results. Describe the measures and instrumentation to be used, who will develop and conduct the evaluation, and how results will be used. The school should work in collaboration with the district to align its evaluation methods with those in the district's Accountability Plan.

9. SCHOOL-TO-WORK AND COLLEGE CHECKLIST

Provide all requested information to complete the checklist.

10. BUDGET STATEMENT FORM

Complete a budget form for each of the RPSS areas. The detailed activity plan that includes the budget for the proposed program or service should include, as appropriate, staffing, supplies, and other considerations based on the needs identified. It must also include the positions required for secondary schools in the regulations.

Enough budget detail must be provided so that the expenditure for each program, initiative or service can be easily determined and/or justified. Costs included in the budget must be driven by the program. If a secondary school wants to implement programs/services that exceed the parameters of the RPSS areas, but are essential to ensure educational success for a specified population of students, and without which such students cannot achieve success in attaining the CCCS, the school must apply for a "particularized need." (See the Particularized Needs Application at the end of this section.) It is the school's responsibility to provide information documenting that these programs/services are absolutely necessary.

- **Note:** WSR secondary schools must fold their RPSS plan and budget into their WSR Implementation Plan and School-based Budget located in Section IX.

Required Programs in Secondary Schools may be funded with current resources, the reallocation of existing resources and/or, when necessary, a request from the district for additional supplemental funds. Current existing resources may include allowable federal, state, and local resources including funds for one-time expenditures in the 2000-2001 budget that will not be continuing in 2001-2002 (e.g., major renovations, computer purchases, rewiring). The request for supplemental funds for an identified need must address all possible funding sources. If the identified need cannot be addressed with current school/district resources and the reallocation process, the district may then request supplemental funding.

A separate budget must be completed for each of the Required Programs in Secondary Schools. In the spaces provided, include a breakdown of all existing resources that will be allocated for the Required Programs in Secondary Schools by funding source and the amount that is being reallocated. If additional funds are being requested, indicate the estimated amount. The total for all identified resources should agree with the total amount for the Required Programs in Secondary Schools. The amounts provided are estimates. Actual requests for supplemental funding will be made through a separate application process that will be part of the district's February budget submission. Districts requesting additional Abbott v. Burke State Aid will be asked to identify other programs, services, and expenditures that would have to be eliminated if supplemental funding is not provided. Once approved, appropriations for Required Programs in Secondary Schools cannot be eliminated.

11. ATTACHMENTS

The following should be attached to the RPSS Plan if there are any changes from the previous year's submission:

RPSS AREA		ATTACHMENT
1	Health & Social Services	<ul style="list-style-type: none"> Mechanism for Access and Referral
2	School Security Program	<ul style="list-style-type: none"> Code of Conduct Roster of Security Guards
3	Alternative Education	<ul style="list-style-type: none"> Mechanism for Identification and Placement Description of Program
4	School-To-Career or College	<ul style="list-style-type: none"> STC Course Offerings STC Checklist
5	Educational Technology	<ul style="list-style-type: none"> NJDOE 2000 School Technology Survey
6	Professional Development	<ul style="list-style-type: none"> List of Current Offerings

12. SMT REVIEW FORM - FORM K ATTACHED

This form should be used by the SMT to ensure that the plan submitted to the department is complete and comprehensive. Incomplete plans may delay approval or lead to disapproval by the department.

TECHNOLOGY PLAN (ASBTP) (2000 – 2002)

Educational Technology is a required component of the required programs for secondary schools. By completing the Abbott School-Based Technology Plan (ASBTP) and checklist, each school will have met the technology plan requirement. The Abbott School-Based Technology Plan and checklist include all substantive information necessary to determine if there is a concerted effort toward infusing educational technology into the curriculum for school years 2000-2002.

If questions arise as to the completion of this document, please contact your district technology director/coordinator or contact Linda Carmona-Bell, Office of Educational Technology, (609) 292-1414, e-mail address: lcarmona@doe.state.nj.us.

Checklist Instructions:

- a) Fill in the county name, district name, and school name.
- b) Indicate the whole school reform model adopted by your school. If no model has been adopted by your school, indicate "N/A" in the space provided (for non-WSR secondary schools only).
- c) Fill in the grade level of the school, the number of students in the school for school year 2001-2002, and the number of teachers in the school for school year 2001-2002.
- d) Indicate the school website address. If the school does not have a direct website address, please indicate the school district's website address.

Note that a correlation **must** exist between the Abbott School-Based Technology Plan (ASBTP) and the district technology plan (DTP). For every question asked on the checklist, enter the page numbers in the corresponding column where the information may be found in the district technology plan (DTP).

VISION

The vision of the school for educational technology over the next two years is to be conveyed. Also include the names and titles of all persons involved with working on the completion of the checklist/technology plan.

GOALS AND OBJECTIVES

The goals and objectives must be linked to the school's vision over the next two years. The goals and objectives need not include all of the district's goals and objectives. However, it is expected that there will be a correlation of goals and objectives between the two plans.

If the school has already adopted a whole school reform model, show how the goals and objectives already stated reflect incorporating technology into the reform model. If the school has not adopted a model, answer "N/A" (for non-WSR secondary schools only).

SURVEY

The Office of Educational Technology requested completion of educational technology surveys by each school in the spring of 2000. If a copy of the school survey is not available to be attached, complete the survey online, print it and attach a copy to the checklist/technology plan. The survey may be obtained from the NJDOE Web site:

<http://www.state.nj.us/njded/techno/survey/result/2000/form.htm>

IMPLEMENTATION STRATEGIES/ACTIVITY/BUDGET TABLES

The attached table is available on the department's website under the Abbott School-Based Technology Plan Checklist at:

<http://www.state.nj.us/njded/techno/localtech/index.html>

Use the table to update activities to meet the goals and objectives specified on the submitted 2000-2002 Technology Plan. Download the table and complete each section. Be sure to include the goal and objective to which the strategy and activity are related. Update the strategies that will lead to the accomplishment of the objective and the specific activities that occur in the classroom using technology.

The activities, when linked to appropriate objectives, must include, at a minimum, professional development; examples of infusing technology into the adopted WSR model and the curriculum; and acquisition and maintenance of hardware, software and all related technology items such as wiring, network access, telecommunications and facilities.

Indicate the title of the person **directly** involved with implementing the strategy/activity.

Provide the funding source, budget detail (e.g., # computers @ per unit cost = total dollar amount) proposed for 2000-2002 associated with implementing the strategy/activity. The funding source may be referenced by the FUNDING SOURCE KEY provided at the bottom of the table.

For non-WSR secondary schools, indicate “N/A” in the Workpaper column.

Indicate the month and year for which the strategy/activity has occurred or will occur.

EVALUATION PLAN

Provide a brief narrative on the process for regularly evaluating educational technology programs, resources, and services in your school.

The attached table is available on the department’s Website under the Abbott School-Based Technology Plan Checklist at:

<http://www.state.nj.us/njded/techno/localtech/index.html>

Download the table and complete each section. Be sure to include the goal to which the objective is related.

For each objective noted in the Goals and Objectives section, indicate the tools or criteria that will be used to determine if the objective was successful. Outcome-based results (i.e., student report, curriculum change) may be used as an evaluative measure.

Indicate the name and title of the person(s) directly involved with conducting and analyzing the evaluation results for each objective.

Indicate the month and year when the evaluation will occur.

SIGNATURES

Since the completion of this checklist/plan is also the school’s technology plan, there is a need to ensure that all involved with its implementation are familiar with its contents. Therefore, the completed document is to be reviewed, signed and dated by an SMT representative, the school principal, and the district’s technology director/coordinator.

Provide the name of the person most familiar with the technology plan in the event that clarifications or revisions are needed. Include the name, title, direct telephone number and e-mail address. Note that e-mail will always be the preferred method of communication by the Office of Educational Technology with the contact person.

FORM A
SUBMISSION CHECKLIST FOR RPSS PLAN

ALL secondary schools: Use this checklist to ensure that the contents of your RPSS submission package are complete. A complete copy of the instructions and forms is located on the NJDOE Web site:

<http://www.state.nj.us/njded/abbotts/guide/>

A feature has been built in to assist you in tracking the date of each draft during the preparation process. In the footer at the bottom of the page for each form, there is a place to enter a date. This date will automatically change every time the document is accessed, thereby keeping track of updated revisions.

- _____ Cover Page - Form B
- _____ 1999-2000 RPSS Plan Review of Progress - Form C
- _____ Inventory and Assessment for Each RPSS Area - Form D
- _____ Review of Community Resources for Each RPSS Area - Form E
- _____ SMT Recommendations for Each RPSS Area - Form F
- _____ Activity Plan for Each RPSS Area - Form G
- _____ Evaluation Form - Form H
- _____ School-to-Career and College Initiatives Checklist - Form I
- _____ Budget Statement for Each RPSS Area - Form J
- _____ SMT Review Checklist – Form K
- _____ Abbott School-Based Technology Plan (ASBTP) Checklist – Form L
- _____ Supporting Documentation or Required Attachments (Revisions)
- _____ Approval by the CSA, Principal and Chair of the SMT if Other than Principal

REVISED PLAN -- Check below any areas of the 2000-2001 RPSS Plan where revisions have been made or new programs and/or services have been added:

- | | | | |
|---|----------------------------------|---|---------------------------------|
| 1 | _____ Health and Social Services | 4 | _____ Professional Development |
| 2 | _____ Security | 5 | _____ School-to-Work or College |
| 3 | _____ Alternative Education | 6 | _____ Technology |

_____ Local Particularized Need Request Attached: Specify

	Name of Particularized Need	Total Amount Requested
1		
2		

FORM B
COVER PAGE FOR RPSS PLAN

DATE:	MIDDLE SCHOOL ____ HIGH SCHOOL ____	GRADE LEVELS REPRESENTED: __ - __
REGION: __ North __ Central __ South		TOTAL STUDENT POPULATION:
SCHOOL ADDRESS 1:		# SP. ED. TEACHERS:
SCHOOL ADDRESS 2:		# SELF-CONTAINED SP. ED. CLASSROOMS:
SCHOOL PRINCIPAL:		# SP. ED. AIDES:
PRINCIPAL PHONE:		CURRENT # SECURITY GUARDS:
PRINCIPAL FAX:		CURRENT # TEACHERS:
PRINCIPAL E-MAIL:		CURRENT # ADMINISTRATORS:
DISTRICT CONTACT PHONE:		TOTAL FUNDS REQUESTED:
Does the school currently have a full-time health & social services coordinator ? ____yes ____no; a full-time dropout prevention officer ? ____yes ____no; a full-time media technology specialist ? ____yes ____no; a full-time technology coordinator ? ____yes ____no?		
Does the school have an on-site health and social services clinic? ____yes ____no Does the school refer to outside health and social service clinics ? ____yes ____no		
CERTIFICATION		
To the best of my knowledge and belief, the information contained in the Required Programs in Secondary Schools Plan is true and correct.		
Certification of School Principal:	Signature -	Date-
Certification of SMT Chair:	Signature -	Date-
Certification of Business Administrator:	Signature -	Date-
Certification of Chief School Administrator:	Signature -	Date-
The Required Programs in Secondary Schools Plan has been duly authorized by the SMT of the _____ School. We have included the required copies as specified.		
Submit the correct number of requested copies of the Required Programs in Secondary Schools Plans no later than: <div style="text-align: center;">December 1, 2000</div>		

FORM C
1999-2000 RPSS PLAN REVIEW OF PROGRESS

COMPLETE ONE REVIEW OF PROGRESS FORM FOR EACH RPSS AREA
(Duplicate this form as needed.)

CHECK: ☐ **Health & Social Services** ☐ **Security**
 ☐ **Alternative Education** ☐ **Professional Development**
 ☐ **Educational Technology** ☐ **School-to-Career or College**

Answer each question on the form by repeating the question and providing a summary response.

1. Describe your progress in the achievement of activities and objectives.
2. Explain the degree to which activities were fully or partially implemented.
3. Provide the status of staffing for the required positions and the impact of these positions on student achievement.
4. Provide a summary of your evaluation outcomes.
5. Describe any barriers to implementation of activities in the previous year and how they were overcome.
6. Describe your progress in WSR exploration including models explored, developer visits, staff visits to other schools, and progress toward adoption of a model by January 30, 2001.
7. Indicate any revisions required, and include a discussion of problems encountered.

FORM D INVENTORY AND ASSESSMENT

Complete an Inventory and Assessment for each of the RPSS areas listed below. Duplicate this page as needed for each RPSS area. Provide a check for the area completed on each form.

- | | |
|---|--|
| 1 <input type="checkbox"/> A Mechanism for Access to Health and Social Services | 4 <input type="checkbox"/> Professional Development |
| 2 <input type="checkbox"/> School Security Program | 5 <input type="checkbox"/> School-to-Work or College Transition |
| 3 <input type="checkbox"/> A Mechanism for Identifying Students Requiring Alternative Education | 6 <input type="checkbox"/> Technology Requirement Met by 2000 Survey |

The purpose of this form is to provide a comprehensive list of programs and services that exist in your school for the RPSS area checked above. On the table below, provide the following: (A) a detailed list of the programs and services that exist in the school, district and/or community that support the checked RPSS area; (B) the name of the provider; (C) the number of students or participants served; and (D) the cost of the program.

	A Program or Service Existing	B Provider School or Community (list name of outside agencies)	C Number of Students Served	D Cost of Program
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				

NOTE: Attach supporting documentation (a summary of hard data on impact) that confirms the results of the inventory and assessment. Do not attach logs or attendance forms.

FORM E REVIEW OF COMMUNITY RESOURCES

Complete a Review of Community Resources Form for each of the RPSS areas listed below. Duplicate this page as needed for each RPSS area. Provide a check for the area completed on each form.

- | | |
|---|---|
| 1 <input type="checkbox"/> A Mechanism for Access to Health and Social Services | 4 <input type="checkbox"/> Professional Development |
| 2 <input type="checkbox"/> School Security Program | 5 <input type="checkbox"/> School-to-Work or College Transition |
| 3 <input type="checkbox"/> A Mechanism for Identifying Students Requiring Alternative Education | 6 <input type="checkbox"/> Infusion of Educational Technology |

The purpose of this form is to investigate community resources that could possibly be used in the coming year to assist you in providing needed programs and services to students in your school. On the table below, provide the following: (A) a list of programs and services existing in the community; (B) the name of community agencies that provide the service but are not currently used by the school; (C) the contact and telephone number for the community agency; (D) the reason the outside agency is not currently used; and (E) the cost of the service or program if provided by the outside agency.

	A Program or Service Existing in Community	B Community Agencies that Provide the Program or Service not Currently Used.	C Contact Person and Telephone Number	D Reason Outside Agency not Currently Used	E Cost of Service or Program by Outside Agency
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10					
11					
12					
13					
14					

FORM F SMT RECOMMENDATIONS

Duplicate this page as needed for each RPSS area. Provide a check for the area completed on each form.

- | | |
|---|--|
| 1 <input type="checkbox"/> A Mechanism for Access to Health and Social Services | 4 <input type="checkbox"/> Professional Development |
| 2 <input type="checkbox"/> School Security Program | 5 <input type="checkbox"/> School-to-Work or College Transition Programs |
| 3 <input type="checkbox"/> A Mechanism for Identifying Students Requiring Alternative Education | 6 <input type="checkbox"/> Infusion of Educational Technology |

The purpose of this form is to provide a concise table that represents the SMT review of all programs and services in the checked RPSS area and to recommend if the program or service is needed. After the inventory and assessment are complete, each item identified must be evaluated as to its effectiveness and efficiency. Provide recommendations for elimination or modification of programs or services judged less than efficacious and efficient, or which overlap with the proposed new program or service. An effective program or service is one that produces the expected and desired result. An efficient program or service is one that produces the intended result in a cost-effective way. On the table below, provide the following: (A) a detailed list of programs and services; (B) whether the program or service is new or existing; (C) recommendation to continue or discontinue the program or service based on effectiveness (how well these programs and services are serving the student population); (D) a determination if the program is cost effective; (E) supporting documentation of need for the program or service and evidence of effectiveness (research-based). **ANY PROGRAM OR SERVICE RECOMMENDED (EXISTING OR NEW) MUST BE TRANSFERRED TO THE ACTIVITY PLAN.**

	A Program or Service	B New (N) or Existing (E)	C Recommendation to Continue or Discontinue Based on Effectiveness	D Cost Effectiveness of Program or Service	E Supporting Documentation Attached Regarding Effectiveness of Recommended Programs & Need
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					

FORM G RPSS ACTIVITY PLAN

Complete an activity plan for each of the six areas

District:	School:
Name of RPSS Area: ____Health & Social Services ____Security ____Alternative Education ____School-to-Career or College ____Professional Development ____Educational Technology	
Goal Statement:	
Objective:	

#	Activity	N or E *	Timeline	Budget Description	2000- 2001 Amount	2001-2002 Amount	GAAP Code Funding Source	Method of Accountability
1.								
2.								
3.								
4.								
5.								
6.								
7.								
8.								
9.								

Attach appropriate supporting documentation for this RPSS Area:

* N=New E=Existing

FORM L
ABBOTT SCHOOL-BASED TECHNOLOGY PLAN (ASBTP)
CHECKLIST AND REVIEW FORM FOR 2000-2002

County: _____ District: _____
 School Name: _____

Adopted Whole School Reform model: _____

School grade level: _____ Number of students in school: _____ Number of teachers in school: _____
 School and/or district Web site address: _____

Page # in ASBTP	Page # in DTP	For NJDOE Use ONLY		LINK ALL OF THE FOLLOWING SCHOOL-BASED TECHNOLOGY PLAN (ASBTP) COMPONENTS TO THE DISTRICT TECHNOLOGY PLAN (DTP)
		NO	YES	
				VISION <ul style="list-style-type: none"> What is the vision for technology in your school over the next two years? List the titles of all persons involved in the development of the school's 2001-2002 technology plan.
				GOALS AND OBJECTIVES (through 2001) <ul style="list-style-type: none"> What are the school's goals and objectives? Be sure to link them to the district technology plan's goals and objectives. If your school has adopted a Whole School Reform model, describe how the adopted model is incorporated into your school's goals and objectives for technology?
				SURVEY <ul style="list-style-type: none"> Attach a copy of the completed school survey form from NJDOE's 2000 School Technology Survey.
				IMPLEMENTATION STRATEGIES/ACTIVITY NARRATIVE <ul style="list-style-type: none"> Describe how the school is acquiring and maintaining all equipment, including building wiring and networking items. Describe the professional development activities for teachers, administrators, and school library media personnel for 1999–2000 and 2001-2002.
				IMPLEMENTATION STRATEGIES/ACTIVITY/BUDGET TABLES Complete the ASBTP implementation strategies/activity/budget tables to describe the implementation strategies and educational technology school-based activities/ link with the CCCS/ responsible party/timeline/ and costs for 2001-2002 school year.
	N/A			BUDGET SUMMARY PAGE List all expenditures from activity tables and indicate amounts, including budget details, total allocation, funding source and workpaper reference.
				EVALUATION PLAN Complete the ASBTP to describe how the evaluation of the goals and objectives for technology in your school will be accomplished.

ABBOTT SCHOOL-BASED TECHNOLOGY PLAN CONTINUED

Reviewed by:

Signature of SMT Representative Date: _____ E-mail: _____

Signature of School Principal Date: _____ E-mail: _____

Signature of District Technology Director/Coordinator Date: _____ E-mail: _____

The person to contact for questions about the school technology plan: (PLEASE PRINT)

Name: _____ Title: _____

Phone number: _____ E-mail address: _____

ABBOTT SCHOOL-BASED TECHNOLOGY PLAN (ASBTP)

IMPLEMENTATION STRATEGIES/ACTIVITY/ BUDGET TABLES for COHORT 3

SCHOOL YEARS 2000-2002

District Name: _____ School Name: _____

Goal: _____

Objective: _____

The ACTIVITIES listed **must include**: professional development; specific examples of infusion of technology into the adopted WSR model and the curriculum; and acquisition and maintenance of hardware, software and all related technology items such as wiring, network access, maintenance, telecommunications fees, and facilities. **NOTE:** Each item in the budget detail must also appear in the corresponding workpaper.

STRATEGY/ ACTIVITY	CCCS related to Strategy Activity	title of person(s) that will implement strategy or activity	Budget detail and funding source (see KEY)	Work- paper	Timeline 2000-2001 or 2001-2002

FUNDING SOURCE KEY:

School Funding = S
District Funding = D
Grant Funding = G
Other Funding = O, please specify in
table

ABBOTT SCHOOL-BASED TECHNOLOGY PLAN (ASBTP)
EVALUATION PLAN
SCHOOL YEARS 2000-2002

District Name: _____ **School Name:** _____

GOAL: _____

OBJECTIVE (Refer to the ASBTP implementation strategies/activity/budget table)	Tools or criteria used to determine the success of the objective	Person(s) that will evaluate the objective	Timeline for Evaluation (Indicate month and year)

FORM H
EVALUATION FORM

District:_____ School:_____

Describe the methods that will be used to evaluate (1) implementation progress (formative) and (2) outcomes (summative). Evaluation of implementation progress should determine to what degree the activities described in the plan have been undertaken (are they happening?). Evaluation of outcomes should determine effects on student achievement (is it working?).

Describe what measures will be used, who will develop and conduct the evaluation, when and how often the evaluation will occur, and how results will be used.

FORM I
SCHOOL-TO-CAREER AND COLLEGE INITIATIVES
CHECKLIST AND REVIEW FORM FOR 2001-2002

Adopted Whole School Reform Model:

Number of students in school: Middle School _____ High School _____

Number of Teachers in School: Middle School _____ High School _____

RPSS Activity Plan Page #	Perkins Plan Page #	For NJDOE Use Only		Has the SMT included the following School-to-Career (STC) components in its WSR and RPSS plans?
		YES	NO	
				A. Is STC integrated into the WSR model design?
				B. INVENTORY OF PROGRAMS/FUNDING SOURCES
				<ul style="list-style-type: none"> Has the SMT provided a listing of all existing programs, by grade level, under each component of STC: 1) school-based, 2) structured learning experiences, and 3) connecting activities?
				<ul style="list-style-type: none"> Are the Perkins programs offered in the school included?
				<ul style="list-style-type: none"> Are Cross-Content Workplace Readiness Standards reflected?
				C. COLLABORATION OF PERSONNEL /BUDGET/SERVICES
				<ul style="list-style-type: none"> Is a list of the names and titles of all persons involved in the assessment, development and implementation of the school's 2001-2002 STC RPSS plan provided?
				<ul style="list-style-type: none"> teachers
				<ul style="list-style-type: none"> guidance counselors
				<ul style="list-style-type: none"> administrators
				<ul style="list-style-type: none"> fiscal staff
				<ul style="list-style-type: none"> parents
				<ul style="list-style-type: none"> employers
				<ul style="list-style-type: none"> community leaders/community-based organizations
				<ul style="list-style-type: none"> Are all funding sources to be utilized listed?
				<ul style="list-style-type: none"> School to Career (STC)
				<ul style="list-style-type: none"> Perkins
				<ul style="list-style-type: none"> Other sources
				<ul style="list-style-type: none"> Is collaboration with existing STC and Perkins personnel reflected in the plan?
				D. IMPLEMENTATION STRATEGIES/ACTIVITIES: SCHOOL-BASED LEARNING
				<ul style="list-style-type: none"> Is a comprehensive career guidance and counseling program included for all students?
				<ul style="list-style-type: none"> Does instruction integrate academic and occupational concepts?
				<ul style="list-style-type: none"> Are students counseled and enrolled in courses in one or more clustered disciplines?
				<ul style="list-style-type: none"> Are career awareness and exploration activities provided for all students?
				<ul style="list-style-type: none"> Are strategies being implemented for secondary and postsecondary articulation (i.e. Tech Prep programs)?
				<ul style="list-style-type: none"> Are professional development activities provided for staff related to Cross-Content Workplace Readiness Standards?
				<ul style="list-style-type: none"> Is staff allowed to attend professional development activities outside of the district?

RPSS Activity Plan Page #	Perkins Plan Page #	For NJDOE Use Only		Has the SMT included the following School-to-Career (STC) components in its WSR and RPSS plans?
		YES	NO	
				E. IMPLEMENTATION STRATEGIES/ACTIVITIES: STRUCTURED LEARNING EXPERIENCE <ul style="list-style-type: none"> • Has the district board of education designed structured learning experiences as rigorous activities that integrate curriculum and are linked to Core Curriculum Content Standards? An example might be project-based learning activities.
				<ul style="list-style-type: none"> • Are opportunities for students provided that allow for a variety of employment positions/activities within an industry?
				<ul style="list-style-type: none"> • Are comprehensive guidance, mentoring and placement services provided?
				<ul style="list-style-type: none"> • Does the school provide a means for students to participate in a series of paid or unpaid experiences, i.e. volunteerism, community service, cooperative education, school-based enterprises, and/or internships if requested by students?
				F. IMPLEMENTATION STRATEGIES/ACTIVITIES: CONNECTING ACTIVITIES <ul style="list-style-type: none"> • Does the instruction provide for activities that match students to structured learning experiences: visits to job sites, industry speakers, mentoring, and/or job shadowing?
				<ul style="list-style-type: none"> • Are there comprehensive career guidance and placement services available for students?
				<ul style="list-style-type: none"> • Is technical assistance provided for all stakeholders?
				G. EVALUATION PLAN <ul style="list-style-type: none"> • Is there a plan to complete a formative and summative evaluation of all program components?
				<ul style="list-style-type: none"> • Is there a plan and evidence of implementation of participating student follow-up to determine post-program outcomes on student placements and activities?

FORM J
2000-2001 BUDGET STATEMENT FORM

COMPLETE ONE BUDGET STATEMENT FORM FOR EACH RPSS AREA

CHECK: ☐ **Health & Social Services** ☐ **Security**
 ☐ **Alternative Education** ☐ **Professional Development**
 ☐ **Educational Technology** ☐ **School-to-Career or College**

District	School	County	District Code	School Code

EXPENDITURE CATEGORY	FUNCTION / OBJECT CODES	FUNDING SOURCE 2000-2001	2000-2001 BUDGET	2001-2002 BUDGET
INSTRUCTION	100-			
Salaries of Teachers	100-101			
Other Salaries for Instruction	100-106			
Purchased Prof. & Tech. Serv.	100-300			
Other Pur. Serv. (400-500)	100-500			
Tuition	100-560			
General Supplies	100-610			
Textbooks	100-640			
Other Objects	100-800			
SUBTOTAL INSTRUCTION				
SUPPORT SERVICES	200-			
Sal. Of Supervisors of Instr.	200-102			
Sal. of Program Directors	200-103			
Sal. of Other Prof. Staff	200-104			
Sal. of Secr. & Clerical Assist.	200-105			
Other Salaries	200-110			
Personal Serv. -Benefits	200-200			
Purchased Prof. - Ed. Services	200-320			
Other Purchased Prof. Services	200-330			
Purchased Technical Services	200-340			
Rentals	200-440			
Contr. Servs - Transport. Other Than Betw. Home & School	200-516			
Travel	200-580			
Other Pur. Serv. (400-500)	200-590			
Supplies and Materials	200-600			
Other Objects	200-890			
SUBTOTAL - SUP. SERV.				
FACILITIES ACQ & CONSTR SERV	400-			
Buildings (Use Charge)	400-720			
Instructional Equipment	400-731			
Noninstructional Equipment	400-732			
SUBTOTAL - FAC ACQ 7 CONSTR				
TOTAL				

FORM K SMT REVIEW CHECKLIST

This form should be used by the SMT to ensure that the plan submitted to the department is complete and comprehensive. Incomplete plans may delay approval or lead to disapproval by the department.

	Plan Component	Question	Yes/No
1.	Cover Page Form B	Are all sections completed correctly with required signatures?	
2.	Review of Progress Form C	Does the review of progress contain all necessary components:	
		a) Achievement of objectives?	
		b) Activities completed?	
		c) Evaluation summary?	
		d) Status of WSR adoption?	
3.	Inventory Form D	Is the inventory complete and does it contain:	
		a) A form for each of the RPSS areas?	
		b) Supporting documentation that confirms the results of the inventory and assessment (hard data)?	
		c) Number of students and/or participants using the program or service?	
		d) Costs of the program or service?	
4.	Community Resources Form E	a) Has a form been completed for each RPSS area?	
		b) Has an adequate inventory of community services been completed?	
		c) Are any community providers more cost effective than the school-based program?	
		d) Are any community providers more cost effective than the school-based program?	

	Plan Component	Question	Yes/No
5.	SMT Recommendation Form F	a) Has the recommendation for continuing or discontinuing programs or services examined all evidence for effectiveness and efficacy? (See Section VII for guidance.)	
		b) For new programs and services, is adequate documentation provided to establish that the proposed program or service has worked successfully in other schools with similar characteristics?	
		c) Has a form been completed for each RPSS area?	
		d) Is supportive documentation for recommendations attached?	
		e) Is there an explanation for each existing program as to why it should be continued or discontinued?	
6.	Activity Plan Form G	Does the plan include the following:	
	Goals	a) Appropriate goals?	
	Objectives	b) Measurable objectives that, where appropriate, target outcomes that are currently below state standards?	
	Areas	c) A form for each RPSS area?	
	Activities	d) Adequate activities to achieve objectives?	
		e) Adequate timelines to accomplish activities?	
		f) Budget data that correspond to expenditures on the budget statement?	
	Accountability	Are the methods of accountability adequate?	
	Technology Plan Form L	g) Is the technology plan attached?	
	Evaluation Form H	h) An evaluation measure for accomplishment of each program/service and objective?	
		i) Are the methods and data used to evaluate progress and outcomes of goals and objectives adequate?	

	Plan Component	Question	Yes/No
		j) Are methods used to evaluate student outcomes adequate?	
	School-to-Career Checklist Form I	Is the school to career checklist attached?	
7.	Attachments	Are the required attachments included for each area?	
8.	Budget Form J	Has the following information been completed correctly on the budget page:	
		a) Funding source?	
		b) 2000-2001 Budget	
		c) Existing funds allocated?	
		d) Funds reallocated?	
		e) How cost effective is the budget?	
		f) Are all programmatic needs included in the budget?	
		g) Are all required positions included in the budget?	

APPLICATION LOCAL PARTICULARIZED NEED FOR SUPPLEMENTAL PROGRAM OR SERVICE

INSTRUCTIONS AND FORMS

**David C. Hespe
Commissioner of Education**

**Barbara Anderson
Assistant Commissioner
Division of Student Services**

**Thomas McMahon
Assistant Commissioner
Division of Finance**

**Submission Due Date:
December 1, 2000**

**To be submitted with
Whole School Reform Implementation Plan
Required Programs in Secondary Schools Plan**

**NEW JERSEY DEPARTMENT OF EDUCATION
PO Box 500
Trenton, NJ 08625-0500**

INTRODUCTION

A. LOCAL PARTICULARIZED NEED

A local particularized need is one characterized by the following:

- is supported by an assessment of needs of a specified population of students in a given school or for early childhood programs in the district;
- has been demonstrated to be the cause of student failure in achieving the Core Curriculum Content Standards;
- can be remedied or corrected by a program or service, which has been formally evaluated to demonstrate its effectiveness; and
- is not effectively addressed by a WSR model or a whole school alternative program design, nor by the required secondary programs.

- **A particularized need is school-based.**
 - **Supplemental funding is district-based.**

Subsequent to the completion of the WSR implementation plan or the Required Programs in Secondary Schools plan, the School Management Team (SMT) may consider whether there exists a particularized need for further supplemental educational programs or services which are essential to ensure students' educational success and without which students cannot achieve the Core Curriculum Content Standards (CCCS). If such a need is determined, the SMT is responsible for providing a recommendation to the local board of education.

Administrative Code provides that, upon determination by the school board that a school has demonstrated a particularized need for an essential program or service, the school board must submit to the Department of Education (DOE) a proposed programmatic plan to address the particularized need. The purpose of this plan is to determine the required elements. The board's request for reallocation or additional funds to support a particularized need will be reviewed by the DOE in the context of the district budget review process.

NO PROGRAMS OR SERVICES BEYOND THOSE REQUIRED BY THE WSR MODEL OR APPROVED DESIGN SHALL BE APPROVED UNLESS A PARTICULARIZED NEED IS DEMONSTRATED PURSUANT TO N.J.A.C. 6A:24A-5.1.

STATE REGULATIONS SUMMARY

The applicable sections of Chapter 6A:24 for a local particularized need include:

- 1.2 – Definitions
- 2.3 - Training of School Management Team Members
- 3.4 - Early Childhood Program Operational Plan
- 4.2 - Whole School Alternative Program Design
- 4.3 - Submission of WSR Implementation Plan
- 4.4 - School-Based Budgets
- 5.1 - Demonstration of Particularized Need
- 5.2 - Application for Supplemental Programs or Services
- 6.1 - Implementation of Required Programs in Secondary Schools
- 7.1 - Application for Additional State Aid
- 8.1 - Long Range Facilities Plan

B. APPLICATION FOR LOCAL PARTICULARIZED REVIEW

The New Jersey Department of Education (NJDOE) will review submissions to ensure the following:

- required sections are complete and accurate;
- particularized needs described are supported by an assessment of student needs;
- particularized needs described have been shown to be the cause of student failure in achieving the CCCS;
- programs or services proposed as the remedy are documented by evidence showing they have worked successfully in the school and/or in other schools with similar characteristics and proven to address the identified need and are not provided by the WSR model or Required Programs in Secondary Schools;
- expenditures support the programs described and are not provided within the illustrative budget or Required Programs in Secondary Schools;
- the submission is complete, including signatures, assurances; and
- SMTs and LEAs are notified of final approvals.

Incomplete submissions may delay approval of the application or lead to disapproval. Once a Local Particularized Need Plan is approved it must be incorporated into the district budget using Fund 15.

C. PLAN APPROVAL PROCESS

Plans will be reviewed by the department to ensure that schools have followed the code requirements. All plans must:

- have all cover page information and signatures;
- be based on a comprehensive needs assessment. Careful consideration must be given to providing a plan that is based on the documented needs of the identified student population; and
- have attached all required justifications, descriptions, and supporting documentation.

The department will review all plans during the budget process and will contact the district and school to discuss the status of their plans.

The following are the steps in the approval process of local particularized needs:

Step 1. Needs Assessment indicates a Particularized Need should be submitted.

Step 2. SMT consults with principal and CSA to consider if a demonstrated particularized need exist.

Step 3. Determination of Particularized Need by SMT should include:

- A. Assessment of student achievement of CCCS
- B. Where the CCCS are not being met a determination that failure of those students is caused by a particularized needs which are not capable of being addressed by existing WSR or required secondary programs at the school level;
- C. An inventory of currently used programs and services targeted to the area(s) of need, together with an assessment of their effectiveness and efficiency in meeting such need, and an explanation as to why they are insufficient to meet the identified needs; and
- D. Review of community resources which could be used to address the identified areas of need and an explanation as to how they are being used or why they are not being used.

Step 4. SMT recommends to the board, with a copy to the SRI, the appropriate supplemental programs and services, which shall be documented by evidence that the programs and services have worked successfully in the school and/or in other schools with similar characteristics and proven to address the identified need.

Step 5. The board responds to SMT in writing:

- A. In those instances where a board does not agree that the SMT has demonstrated a particularized need, the board shall provide to the SMT a detailed statement of the reasons for its determination.
- B. In those instances where the board determines that a particularized need for a recommended supplemental program or service has been

demonstrated, the board shall submit its proposed plan for the program to the department for approval in accordance with provisions of N.J.A.C. 6A:24-7.1.

C. In those instances where a board determines that resources are insufficient to support the supplemental programs or services approved pursuant to N.J.A.C. 6A:24-5.2 after all possible reallocation at the school and district levels have been made, the board shall apply to the department for additional state aid in accordance with the requirements of N.J.A.C. 6A:24-7.1.

Step 6. The board submits its proposed plan for the program or service to the department for approval. Applications for such approval shall be submitted on forms provided by the department and shall at a minimum include:

- A. The particularized needs forms;
- B. A demonstration that one or more public hearings have been held in order to obtain parent, student, teaching staff and citizen input on the application;
- C. A general description of the supplemental program(s) or service(s) and an explanation of the particularized need(s) which shall be met in order to enable those students to achieve the Core Curriculum Content Standards;
- D. A demonstration that the supplemental program(s) or service(s) is documented by evidence that the program(s) or service(s) have worked successfully in the school and/or in other schools with similar characteristics and is proven to address the identified need(s);
- E. A plan for evaluating the continuing effectiveness and efficiency of the supplemental program(s) or service(s);
- F. A demonstration that the requested supplemental programs or services will not delay or impede implementation of, and does not duplicate, WSR or secondary programs and services required;
- G. A recommendation of elimination or modification of existing programs or services identified as less than effective and efficient, or which would overlap with proposed new program or service; and
- H. An operating budget for the purpose of the supplemental program(s) or service(s).

Step 7. Supplemental programs or services that are not approved by the department pursuant to N.J.A.C.6A:24-5.2 cannot be included in a district wide budget that requests additional state aid pursuant to N.J.A.C.6A:24-7.1.

- A. Any application for supplemental programs or services denied by the Department may be appealed to the Commissioner pursuant to the provisions of N.J.A.C. 6A:24-9.1.

INSTRUCTIONS

The board must submit a separate application for each discrete or unrelated particularized need for a supplemental program or service. Separate applications are required for each school within a district even though two or more schools may have demonstrated very similar particularized needs. A signed board resolution must be submitted with the application. At a minimum, the programmatic plan for a particularized need should include:

1. Cover Page- Form Provided

Insert the date of the signed board resolution in the space provided.

2. Definition of Identified Particularized Need

3. Program Description

Provide the following in the Program Description:

- a description and explanation of the particularized need that the programs or services proposed as the remedy will address to enable the identified students to achieve the CCCS;
- a description of how the requested supplemental program will not delay or impede implementation of, or does not duplicate, WSR programs, Required Programs in Secondary Schools, or other services required elsewhere in the regulations;
- a description of the district's plan for incorporating the program or service into subsequent regular budgeting cycles.
- inventory and assessment of all such existing programs that have not been already included in the WSR Implementation Plan or Required Programs in Secondary Schools;

4. Description of Methods and Results

Describe the methods and results of the student needs assessment underlying the request, including an identification of the specific population(s) to be served.

5. Justification

Provide a justification that shows that the needs to be addressed cannot be met through existing WSR or Required Programs in Secondary Schools. This justification should include the following:

- Supporting documentation that confirms the results of the inventory and assessment;
- Explanation for why each existing WSR or RPSS program is insufficient to meet the identified need.
- If the application is for on-site health and social services, an explanation as to why the program cannot be provided efficiently or effectively off site.

6. Detailed Activity Plan – Form Provided

On each Activity Plan form, state the name of the district, school, WSR model or Required Program in Secondary Schools area, current date and page number. The revision date will be used if revisions are necessary. Indicate cohort or Non-WSR secondary school on each form. Complete the following for each page of the Activity Plan:

- create a goal, objective and benchmark relating to accomplishment of the particularized need;
- describe the tasks and activities in chronological order planned for the accomplishment of each goal and objective in the Activity column;
- indicate the month and year the activity will be completed in the Timeline column;
- list, in detail, all expenditures necessary to complete the activity in the Budget Description column;
- include the cost of each detailed expenditure in the Budget Amount column;
- indicate the GAAP code and Workpaper from the school based budget form which coincides with the expenditures and costs for this activity; and
- indicate in the Evaluation column the anticipated result/outcome & specific data that will track the impact of each program or service.

7. Budget – Form Provided

A detailed plan and budget for the proposed program or service, including staffing, supplies, facilities and other considerations, as well as a demonstration, where appropriate, of compliance with applicable law. A separate budget form (attached) must be submitted for each particularized need submitted by a school.

An identified particularized need may be funded with current resources, the reallocation of existing resources and/or a request for additional supplemental funds. Current existing resources may include allowable federal, state, and local resources including funds for one-time expenditures in the 2000-2001 budget that will not be continuing in the 2001-2002 (e.g., major renovations, computer purchases, rewiring). The request for supplemental funds for an identified need must address all possible funding sources. If the identified need cannot be addressed with current resources, a district may request supplemental funding.

Complete a budget statement for the identified particularized need. In the spaces provided, include a breakdown of all existing resources that will be allocated for the particularized need by funding source and the amount that is being reallocated. If additional funds are being requested, indicate the estimated amount. The total for all identified resources should agree with the total amount for the particularized need. The amounts provided are estimates. Actual requests for supplemental funding will be made through a separate application process that will be part of the February budget submission. Those districts making supplemental funding requests will be asked to identify other programs, services and expenditures that would have to be eliminated if supplemental funding is not provided. **Once approved, appropriations for particularized needs cannot be eliminated.**

FORMS

SUBMISSION CHECKLIST FOR THE APPLICATION FOR LOCAL PARTICULARIZED NEED FOR SUPPLEMENTAL PROGRAM OR SERVICE

Use this checklist to ensure that the contents of your Particularized Needs submission package are complete.

- _____ Cover Page (Form Provided)
- _____ Definition of Identified Particularized Need
- _____ Program Description
- _____ Description of Methods and Results of Student Needs Assessment
- _____ Justification Showing that WSR Model or Required Secondary Program Does Not Address Student Need
- _____ Inventory and Assessment of All Existing Programs
- _____ Supporting Inventory and Assessment of all Existing Programs Documentation
- _____ Explanation for Why Each Existing Program Does Not Meet Particularized Student Need
- _____ Health and Social Service Request--Explanation Why the Program Cannot Be Provided Effectively Off Site
- _____ Detailed Activity Plan (Form Provided)
- _____ Budget (Form Provided)

**NEW JERSEY DEPARTMENT OF EDUCATION
LOCAL PARTICULARIZED NEED FOR SUPPLEMENTAL PROGRAM OR SERVICE
A. COVER PAGE**

SCHOOL:		NAME OF PROPOSED PARTICULARIZED NEED PROGRAM:	
DISTRICT:		POPULATION SERVED:	
COHORT: ____1 st ____2 nd ____mid-yr. 2 nd ____3 rd	WSR MODEL:	SECONDARY SCHOOL: ____ MIDDLE ____ HIGH GRADES SERVED: ____ TO ____	
CURRENT DATE:		REGION: ____ North ____ Central ____ South	
DISTRICT CONTACT:		GRADE SPAN OF SCHOOL:	
DISTRICT CONTACT PHONE:		SCHOOL PRINCIPAL:	
DISTRICT CONTACT FAX:		PRINCIPAL PHONE:	
DISTRICT CONTACT E-MAIL:		PRINCIPAL FAX:	
SCHOOL ADDRESS:		PRINCIPAL E-MAIL:	
DISTRICT BUSINESS ADMINISTRATOR NAME:		STATE, ZIP	
DISTRICT ADDRESS—CITY, STATE, ZIP		DISTRICT BUSINESS ADMINISTRATOR PHONE/FAX:	
		TOTAL FUNDS REQUESTED:	
CERTIFICATION			
To the best of my knowledge and belief, the information contained in the Local Particularized Need for Supplemental Program/Service Application is true and correct.			
Certification of School Principal:			
Certification of WSR School Facilitator:			
Certification of Chief School Administrator:			
Certification of Board of Education:			
The Local Particularized Need Application has been duly authorized by the SMT of the _____ School. We have included the copies specified in the instructions			
Certification of SMT Chair:			
SMT Chair Address:		SMT Chair Phone:	
Local Particularized Needs Applications must be included with the WSR Implementation Plan or RPSS Plan and received by:			
December 1			

ACTIVITY PLAN **FOR LOCAL PARTICULARIZED NEED FOR SUPPLEMENTAL PROGRAM OR SERVICE**

Duplicate as required.

<u>District:</u>		<u>School:</u>				
Cohort: <u>1st</u> <u>2nd</u> <u>mid-yr. 2nd</u> <u>3rd</u>		<u>WSR Model:</u>		<u>Non-WSR Secondary School</u>		
<u>Name of Proposed Particularized Need Program or Service:</u>						
<u>Goal Statement:</u>						
<u>Objective:</u>						
Population:						
#	Activity	Timeline	Budget Description	Budget Amount	GAAP Code & Workpaper	Evaluation Results
1						
2						
3						
4						
5						
6						
7						
8						
9						

**NEW JERSEY DEPARTMENT OF EDUCATION
LOCAL PARTICULARIZED NEED FOR SUPPLEMENTAL PROGRAM OR SERVICE
BUDGET SUMMARY**

NAME OF PROPOSED PROGRAM OR SERVICE TO MEET PARTICULARIZED NEED:

District	School	County	District Code	School Code

EXPENDITURE CATEGORY	FUNCTION / OBJECT CODES	FUNDING SOURCE	2000-2001 BUDGET	EXISTING FUNDS ALLOCATED	FUNDS REALLO- CATED	ADDITIONAL FUNDS REQUESTED
INSTRUCTION	100-					
Salaries of Teachers	100-101					
Other Salaries for Instruction	100-106					
Purchased Prof. & Tech. Serv.	100-300					
Other Pur. Serv. (400-500)	100-500					
Tuition	100-560					
General Supplies	100-610					
Textbooks	100-640					
Other Objects	100-800					
SUBTOTAL INSTRUCTION						
SUPPORT SERVICES	200-					
Sal. Of Supervisors of Instr.	200-102					
Sal. of Program Directors	200-103					
Sal. of Other Prof. Staff	200-104					
Sal. of Secr. & Clerical Assist.	200-105					
Other Salaries	200-110					
Personal Serv. -Benefits	200-200					
Purchased Prof. - Ed. Services	200-320					
Other Purchased Prof. Services	200-330					
Purchased Technical Services	200-340					
Rentals	200-440					
Contr. Servs - Transport. Other Than Betw. Home & School	200-516					
Travel	200-580					
Other Pur. Serv. (400-500)	200-590					
Supplies and Materials	200-600					
Other Objects	200-890					
SUBTOTAL - SUP. SERV.						
FACILITIES ACQ & CONSTR SERV	400-					
Buildings (Use Charge)	400-720					
Instructional Equipment	400-731					
Non Instructional Equipment	400-732					
SUBTOTAL - FAC ACQ 7 CONSTR						
TOTAL						
	Funding Source	Estimate				
Resources (Attach a sheet if additional space is needed)						
Existing Resources						
Existing Resources						
Reallocations						
Supplemental Funding Request						
TOTAL						

SMT REVIEW FORM
LOCAL PARTICULARIZED NEED FOR SUPPLEMENTAL PROGRAM OR SERVICE

This form should be used by the SMT to ensure that the plan and budget submitted to the Department of Education (DOE) are complete and comprehensive. DO NOT SUBMIT THIS FORM WITH THE PLAN. Incomplete plans and/or budgets may delay approval or lead to disapproval by the DOE.

	PART. NEED PLAN COMPONENT	<u>QUESTION</u>	YES/NO
1	Cover Page	Are all sections completed correctly?	
2	Board Resolution	Is a Board of Education resolution approving submission of the plan enclosed?	
3	Definition	a. Has a clear and complete definition of the proposed particularized need been included?	
		b. Is adequate documentation provided to establish that the proposed program or service is documented by evidence showing it has worked successfully in the school and/or in other schools with similar characteristics and proven to address the identified need with effective results?	
4	Program Description	Is the description adequate and does it contain the following necessary components:	
		a. Explanation of the particularized need, that the program or service will address to enable the identified students to achieve the CCCS?	
		b. Description of how the requested program will not delay or impede implementation of, nor duplicate, WSR program, RPSS or other services required in the regulations?	
		c. Description of district's plan for incorporating the program or service into subsequent regular budgeting cycles?	
5	Justification	Does the justification for the particularized need adequately show that the needs cannot be met through existing WSR or RPSS and include the following:	
		a. An inventory and assessment of all such existing programs that have not been already included in the WSR Implementation Plan or RPSS?	
		b. Supporting documentation that confirms the results of the inventory and assessment (hard data)?	
		c. Explanation for each existing program or service as to why it is insufficient to meet the identified need?	
		d. If the application is for health and social services on site, an explanation as to why the program cannot be provided efficiently and effectively off site?	

	PART. NEED PLAN COMPONENT	<u>QUESTION</u>	YES/NO
6	Activity Plan	Does the plan include the following?	
	Goals	a. Appropriate goals?	
	Objectives	b. Measurable objectives?	
	Activities	c. Adequate activities to achieve objectives?	
		d. Adequate timelines to accomplish activities?	
		e. Budget data that corresponds to expenditures on the budget sheet?	
		f. An evaluation measure for accomplishment of each activity and objective?	
	Evaluation	Are the methods used to evaluate progress and outcomes of goals and objectives adequate?	
		Are methods used to evaluate student outcomes adequate?	
7	Budget	Has the following information been completed correctly on the budget page?	
		a. Funding source?	
		b. 2001-2002 Budget	
		c. Existing funds allocated?	
		d. Funds reallocated?	
		e. Additional funds requested?	
		f. How cost effective is the budget?	
		g. Are all needed supplies and staff included in the budget?	